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FOR ACTION

RECOMMENDATION FOR ADDITIONAL GENERAL RESOURCES TO FUND THE APPROVED COUNTRY PROGRAMME**

Zambia

SUMMARY

The present document contains a recommendation for additional general resources to fund the approved country programme of Zambia for which the balance of approved general resources is not sufficient to fund the programme up to the approved programme period. The Executive Director recommends that the Executive Board approve additional general resources in the amount of $840,500 for 1996 to achieve the objectives of the country programme as originally approved by the Board.

* E/ICEF/1996/9.

** In order to meet documentation deadlines, the present document was prepared before aggregate financial data were finalized. Final adjustments, taking into account unspent balances of programme cooperation at the end of 1995, will be contained in the "Summary of 1996 recommendations for general resources and supplementary funding programmes" (E/ICEF/1996/P/L.43 and Add.1).

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1. The current country programme for Zambia covering the period 1994-1996 was approved by the Executive Board in May 1994 with an allocation of $3.4 million from general resources (E/ICEF/1994/P/L.19). The indicators guiding the allocation of general resources planning levels were reviewed in late 1994 and the general resources ceiling for Zambia has been increased for 1995 and 1996. As a result, the balance of approved general resources is not sufficient to provide funding for 1996. Therefore, the Executive Board is requested to approve an additional amount of $840,500 to cover the approved level of general resources. These funds will be used primarily to strengthen the following country programme components: advocacy; programme communications; the monitoring of child survival and development (CSD); and water and sanitation.

RECOMMENDED PROGRAMME COOPERATION, 1996

2. The overall objectives of the 1994-1996 country programme are to (a) reduce child mortality and improve child health; (b) reduce maternal mortality and improve women's health; (c) develop effective methods to reduce poverty and malnutrition, with the participation of the poor; (d) strengthen decentralized district management of services and develop a framework for community-based management; and (e) reduce illiteracy and expand access to basic education and learning opportunities for primary-school-age children, adolescents and women.

3. To achieve those goals, three mutually reinforcing strategies are being pursued. Firstly, actions are being taken to promote understanding and support for the Convention on the Rights of the Child and the National Programme of Action (NPA) for Children so as to position children and women at the centre of Zambia's reform and development agenda. Secondly, actions are being taken to increase the quality and quantity of essential social services, especially children's and women's health and nutrition services, primary education and life skills, water and sanitation, and social safety nets to provide timely support to families in distress. The third strategy is to strengthen the capacities of the community and families to protect and care for their children. The strategies are being implemented through five programmes: primary health care (PHC) and nutrition; basic education; planning, social statistics and programme support; water, sanitation and hygiene education; and community-based CSD. The additional general resources will be used to strengthen the advocacy, communications and social mobilization components of the entire country programme.

Primary health care and nutrition

4. The PHC programme incorporates the Bamako Initiative strategy and aims to reduce mortality and morbidity of children and women through nationwide interventions, with integration at district and health centre levels. UNICEF assistance will strengthen PHC service delivery at the community level; at the institutional level, the focus is to increase the capacity of human and organizational systems to support PHC; and at the national level, support will be provided to develop government policies that respond to Zambia's health needs and development challenges.

5. The objective of the maternal health/safe motherhood project is to reduce maternal mortality and morbidity by improving the coverage and quality of care, with an emphasis on high-risk individuals and groups. Training and the provision of equipment and diagnostic facilities will improve the quality of antenatal and post-natal care. The syphilis prevention and treatment strategy will be expanded; training of traditional birth attendants (TBAs) will continue; and education and mobilization activities will stress the importance of women's health, adequate care during pregnancy, referral of high-risk pregnancies and breast-feeding. Adolescent girls will be a specific target group.

6. The objective of universal child immunization (UCI) is to reduce mortality and morbidity specifically through maintaining high immunization coverage and improving the quality of vaccination services. Special emphasis will be placed on strategies for the elimination of neonatal tetanus and the eradication of polio by the year 2000. UCI activities will focus on improving service delivery through integrated training in PHC/UCI units; strengthening the cold-chain system and the procurement and maintenance of equipment and transport; and the training of district and health centre managers. Evaluation activities, periodic surveys and operational research will be carried out to supplement routine data collection.

7. The objective of the control of diarrhoeal diseases (CDD) programme is to reduce infant and child mortality, morbidity and malnutrition caused by diarrhoeal diseases. The programme includes integrated training, supervision and monitoring of PHC/CDD to strengthen the functioning of oral rehydration therapy corners in all health facilities. Training will target managers, health centre staff and other personnel. Community education and mobilization will be strengthened and extended to include other PHC components.

8. The nutrition programme aims to reduce child mortality and morbidity and promote growth through the early detection and correction of growth faltering and the early detection and rehabilitation of malnourished children. A decrease in malnutrition is sought through an integrated PHC approach. Growth monitoring and promotion will be pursued through training health centre staff, TBAs and community health workers, as well as through nutrition education, particularly with communities. Vitamin A and iodine deficiencies will be addressed through the development of national strategies and support for their implementation.

9. A project on strengthening district PHC in selected districts has now expanded to support the national health reform process. Activities include support for the decentralization of planning, budgeting, management and operations to the district level; the formulation and implementation of a delivery of a basic health care package; identifying and developing appropriate health care financing strategies; promoting linkages and partnerships with communities in the promotion and management of community health; and developing ways to monitor and strengthen the supervision of service delivery, with an emphasis on quality assurance.

10. HIV/AIDS prevention and control strategies also will be strengthened. In cooperation with a growing network of non-governmental organizations (NGOs), church organizations and community groups, UNICEF will support community-based programmes to care for the increasing number of AIDS orphans and distressed

families and HIV/AIDS counselling services. The major emphasis, however, will be on HIV/AIDS prevention. In so doing, UNICEF will work with the Government and the Children in Need network of NGOs to develop community education strategies on HIV/AIDS prevention, life skills training programmes and other approaches to communication with youth to promote safer life styles through peer group contacts, drop-in centres, counselling centres and clubs, among others. The priority target groups are out-of-school youth, street children and sex workers. There also will be important efforts to care for orphans. An amount of $137,500 will be allocated for these activities.

Basic education

11. The national goals for the education sector are (a) the provision of universal access to the complete primary cycle by the year 2000; (b) the reduction of the adult illiteracy rate from 25 per cent in 1990 to 12 per cent by the year 2000, with female illiteracy no higher than among males; and (c) the development of community-based early childhood care and education. The objectives for UNICEF cooperation are to (a) increase the completion rate of students at the end of 1996 to 95 per cent of the grade one intake in 1992; (b) ensure that all 10-year-olds achieve or surpass competencies defined for grade four or its equivalent by 1996; (c) reduce adult illiteracy from 25 per cent in 1990 to 20 per cent in 1996; and (d) reduce female illiteracy from 33 per cent in 1990 to 22 per cent in 1996.

12. The learning achievement component relates to formal education and focuses primarily on the development and production of learning materials, capacity-building, relevance of the curriculum and development of primary education assessment techniques. Support to the production of learning materials includes production of an Education for All (EFA) magazine; supplementary readers in English and local languages for grades one to four; and workbooks and teachers guides. Capacity-building includes in-service training of teachers in teaching methodologies and health education, and training of provincial and district staff and head masters in planning and management towards the achievement of EFA. Innovative cost-effective measures will be developed to meet a shortage of resources, such as intensification of the child-to-child approach, multigrade teaching, a more effective time-tabling and improved school community linkages. Intersectoral linkages and closer involvement with churches and NGOs will be reinforced. The programme also will support the delivery of educational services through the development of EFA policies as well as innovative activities which focus on the poor, women and girls. Special attention will be given to promoting HIV/AIDS awareness among young children and youth through the education system.

13. The component on learning opportunities, particularly for women and girls, will respond to community demands for functional literacy and the provision of survival skills that respond to the needs of women, out-of-school children and adolescents. Post-literacy and informal learning opportunities will be developed. Contacts with NGOs, churches and other groups will be developed to deliver these services. Community- and family-based early childhood care, education and development also will be supported. Facts For Life will be used in the preparation of learning materials. An amount of $140,000 will be allocated for these activities.

Planning and social statistics

14. The project on planning and social statistics seeks to (a) strengthen capacities to measure the impact of policies and programmes on the welfare and vulnerability of poor households; (b) measure and monitor human development indicators, and especially progress towards the achievement of goals for women and children; (c) develop policies and programmes which respond effectively to the needs and rights of women and children; and (d) support the management, monitoring and evaluation of the programme of cooperation. Additional funds will be used to strengthen the Food, Health and Nutrition Information System. Specifically, technical and training support will be provided to improve the capacity of the information system to monitor, analyse and report on young child health and nutritional status, food security and care; to strengthen district-level capacities to monitor community, family and child well-being; and to develop district development plans which respond to those situations. An amount of $200,000 will be allocated for these activities.

Water, sanitation and hygiene education

15. This programme seeks to contribute to the reduction in morbidity and mortality due to diseases associated with inadequate water supplies and sanitation and poor hygiene practices; and to reduce time and energy expenditures, especially by women and young girls, on the collection of water. The programme will increase access to potable water supplies through promoting community responsibility and capacities to manage, maintain and operate community water supplies; improve sanitation and hygiene practices at the household level by providing more appropriate and practical guidance on effective water supply, sanitation and hygiene education strategies; and improve access to safe water supplies and sanitation through the support of community-based projects for an estimated 200,000 people (40,000 families). Additional funds will be used to orient government departments and NGOs to the national water supply, sanitation and hygiene education strategy; to train district and village water supply sanitation and hygiene education committees and community water point caretakers in Southern Province; to provide technical assistance and material support to NGOs involved in rural community-based sanitation and hygiene education activities; and to develop the sanitation and hygiene education components of the child-to-child programme. An amount of $350,000 will be allocated for these activities.

Community-based child survival and development

16. This programme will empower communities with skills to improve the socio-economic situation of women and welfare of children through a participatory development approach. The programme aims to promote household and community capacities to care for and promote the healthy development of children through actions promoting household incomes and food security; increasing access to and use of health services; promoting effective nutrition support strategies; supporting primary education, with a special emphasis on keeping girls in school; improving access to safe water supplies and appropriate sanitation; and introducing appropriate labour-saving and income-generating technologies and skills training. Part of the additional funds will help to cover the training costs to operationalize the NPA in Luapula Province. Specifically, training

courses will be undertaken to orient local politicians and community leaders to the NPA goals for children and to strengthen the capacities of the District Development Coordination Committee to ensure that district plans directly address the priority needs of children. An amount of $13,000 will be allocated for these activities.

Annual funding requirements

(In thousands of United States dollars)

Current programme cycle	Approved general resources funding a/	Additional funding proposed 1996
1994-1996	1 409.5	840.5

a/ The amount shown here includes the actual balance carried over from the previous programme cycle.